



CITY OF WESTMINSTER

FINANCE DEPARTMENT
8200 Westminster Boulevard
Westminster, CA 92683
(714) 898-3311

DOG LICENSE APPLICATION

Date

/ /

Dog's Name: _____ Age: _____ Breed: _____ Color: _____ Sex: _____

Owner/ Custodian Name: _____

Spayed/Neutered ☐
(check if yes)

Street Address: _____

Mailing Address if Different _____ City _____ State _____ Zip _____

Home Phone: _____

Work Phone: _____

To pay by credit please fill in information below:

Credit Card Information:

Billing Name: _____

Card #

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Expiration Date: ____/____ Signature: _____

Regular		\$50.00
Spay/Neuter		\$13.00
Sr. Citizen		\$6.50
Late fee		\$25.00
Total Paid	\$	

PLEASE CHECK BOXES BELOW FOR ANY CERTIFICATES OR DOCUMENTATION YOU ARE ENCLOSING

- ☐ Photocopy of Rabies Certificate
- ☐ Photocopy of Spay/ Neuter Certificate
- ☐ Photocopy of Proof of Age- Senior Citizen